



Marijuana Legalization in Iowa? Just the Facts

Governor's Office of Drug Control Policy

www.iowa.gov/ODCP

August 2013

U.S. Marijuana Laws

- 20 states & DC allow “medical marijuana” (1996-2012), about half by ballot votes. (*Alaska, Arizona, California, Colorado, Connecticut, Delaware, Hawaii, Illinois, Maine, Massachusetts, Michigan, Montana, Nevada, New Hampshire, New Jersey, New Mexico, Oregon, Rhode Island, Vermont, Washington & District of Columbia)
- Voters in 2 states (Colorado & Washington State in 2012) legalized adult marijuana use.
- 17 states have “decriminalized” marijuana.
- Marijuana remains illegal in 30 states, including Iowa, & by the U.S. (1970) as a Schedule I Controlled Substance (high potential for abuse & no accepted medical value).

Other Legal Developments

- Some possible signs of buyer's remorse or NIMBY? Approximately 105 communities in Colorado & 200 in California have enacted local bans on "medical marijuana" centers. The city council has tried to ban "medical marijuana" dispensaries in Los Angeles.
- Federal law enforcement has cracked down in California, closing up to 600 "medical marijuana" dispensaries for violating federal controlled substance laws or state "medical marijuana" laws re: nonprofits, caregivers, medical use, etc.
- Lawsuits & court challenges are pending.

Scientific Positions on Marijuana

- The FDA has not approved the use of marijuana as medicine, saying “there is currently sound evidence that smoked marijuana is harmful.”
- The Institute of Medicine has declared smoking marijuana is unsafe, & “marijuana is not modern medicine.”
- The National Institute on Drug Abuse reports “marijuana is addictive,” with nearly 4.5 million Americans meeting the clinical criteria for marijuana abuse or dependence.

Health Group Positions on Marijuana

- Major public health organizations (American Cancer Society, American Glaucoma Foundation, National Pain Foundation, National Multiple Sclerosis Society, etc.) do not support smoked marijuana.
- The AMA calls for marijuana research, saying its position “should not be viewed as an endorsement of state-based medical cannabis programs, the legalization of marijuana, or that scientific evidence on the therapeutic use of cannabis meets the current standards for a prescription drug product.” 2009 American Medical Association

Health Group Positions on Marijuana

- “Until further research in this area, ASAM cannot endorse the legalization of the use of marijuana either as a ‘medicine’ or for any other sanctioned use of this drug. Smoking any drug is an unhealthy form of drug delivery.” 2011 American Society of Addiction Medicine
- “Drug Courts have seriously addicted individuals with long criminal records who have alienated nearly everyone they love. In every case, they tell us it began with marijuana...NADCP unequivocally stands against the legalization of marijuana and the use of smoked marijuana as ‘medicine’.” 2012 National Association of Drug Court Professionals

Claims of Pro-Legalization Supporters



- Medicalization: Marijuana can be used to help treat people for a wide range of chronic health conditions.
- Decriminalization: Current laws overcrowd prisons & unfairly make criminals out of marijuana users.
- Legalization: Controlling marijuana as illegal is too costly for taxpayers, & legalizing it would create an infusion of tax revenue.

Marijuana & Health

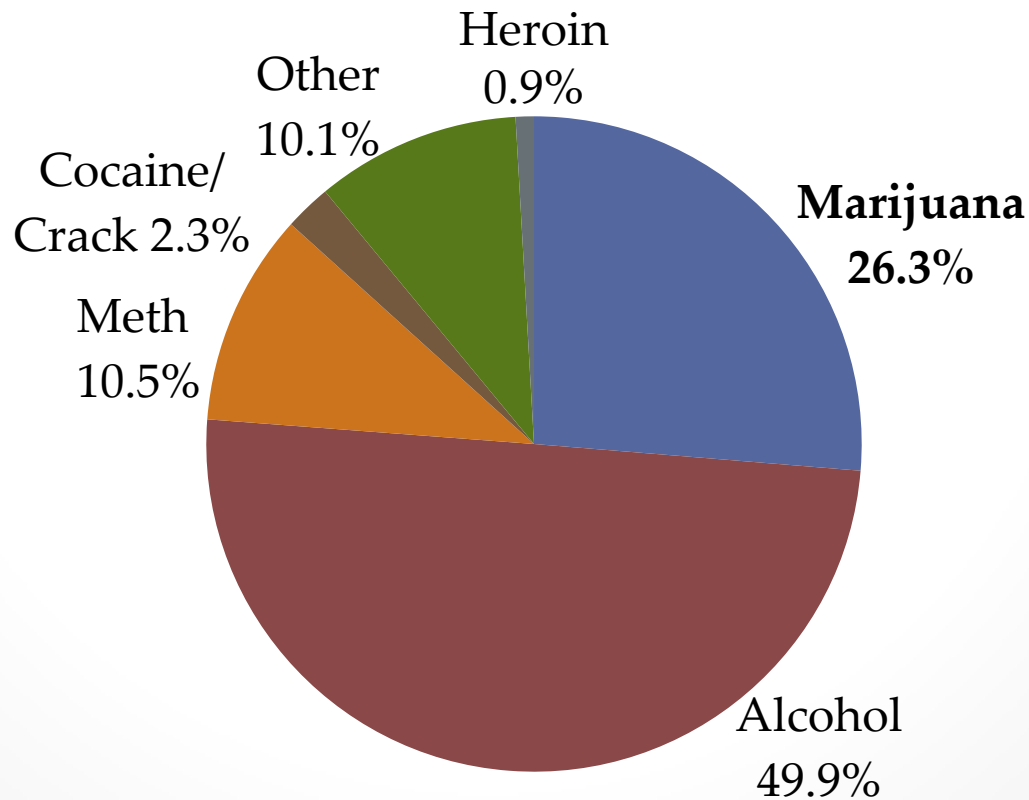
- Marijuana can cause or worsen respiratory symptoms. It impairs short-term memory & motor coordination; slows reaction time; alters mood, judgment & decision-making; & in some people can cause severe anxiety or psychosis. Marijuana raises heart rate. 2012 National Institute on Drug Abuse, NIH, Drug Facts
- Marijuana use causes distorted perceptions, impaired coordination, difficulty with thinking & problem solving & disrupted learning & memory. 2012 National Institute on Drug Abuse, NIH, Drug Facts
- Marijuana use is associated with a higher likelihood of dropping out from school...marijuana also contributes to accidents while driving. 2012 National Institute on Drug Abuse, NIH, Drug Facts

Marijuana & Health

- More U.S. citizens met the American Psychiatric Association's diagnostic criteria for marijuana abuse or dependence than for pain relievers, cocaine, tranquilizers, hallucinogens & heroin combined. 2011 U.S. Substance Abuse & Mental Health Services Administration, National Survey on Drug Use & Health
- Marijuana is addictive....about 9% of users become addicted to marijuana. 2012 National Institute on Drug Abuse, NIH, Drug Facts
- Marijuana dependent users are 15 times more likely to have a mental health disorder than those in the general population. March 2013 Addiction, Trimbos Netherlands Institute of Mental Health & Addiction
- 26.3% of Iowans entered substance abuse treatment due primarily to marijuana use, the highest level in 20 years. 2012 Iowa Department of Public Health

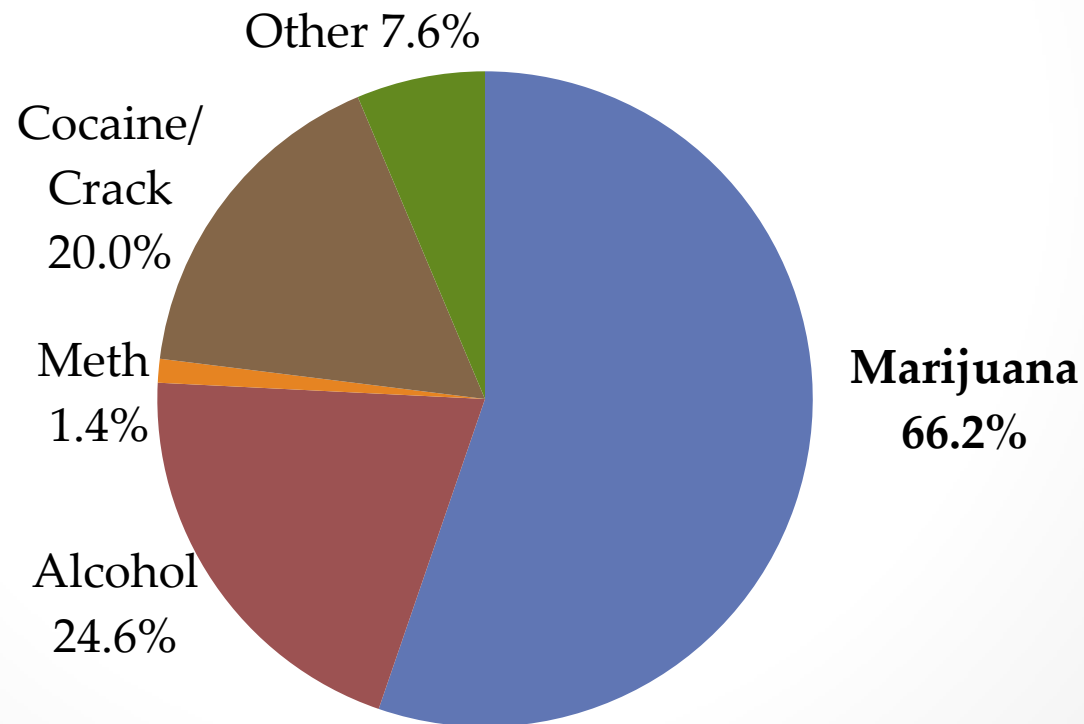
Marijuana & Health

- The proportion of Iowans (adults & juveniles) entering substance treatment primarily due to marijuana use has reached its highest point in 20 years – 26.3%. 2012 Iowa Department of Public Health



Marijuana & Health

- The proportion of Iowa juveniles entering substance treatment primarily due to marijuana use has reached its highest point in 20 years – 66.2%. 2012 Iowa Department of Public Health



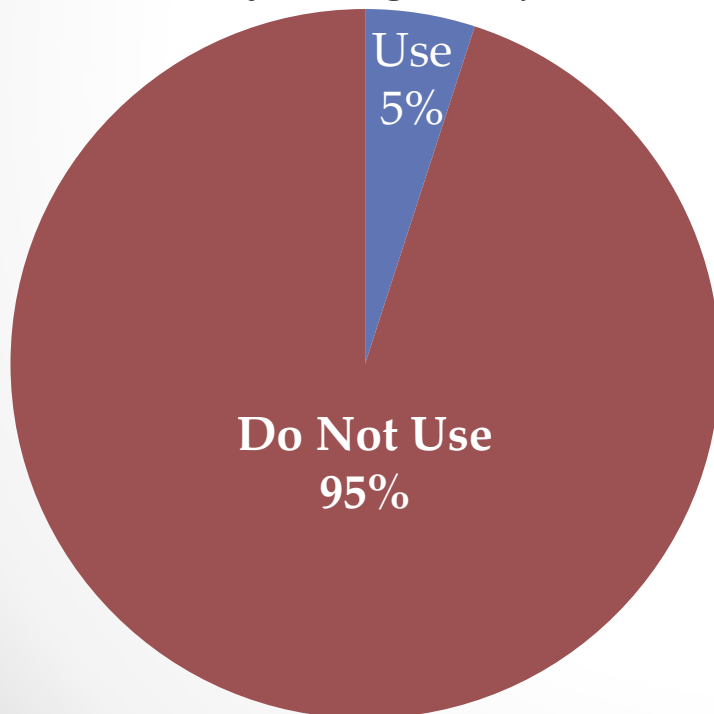
Marijuana & Health

- Marijuana is Iowa's most used illicit drug. However, while more have tried it, the vast majority of Iowans choose not to use it now:
- 5% of Iowa 6th, 8th & 11th graders currently use marijuana.
2012 Iowa Youth Survey
- 5.18% of all Iowans 12 & older currently use marijuana.
2010-2011 National Survey on Drug Use & Health

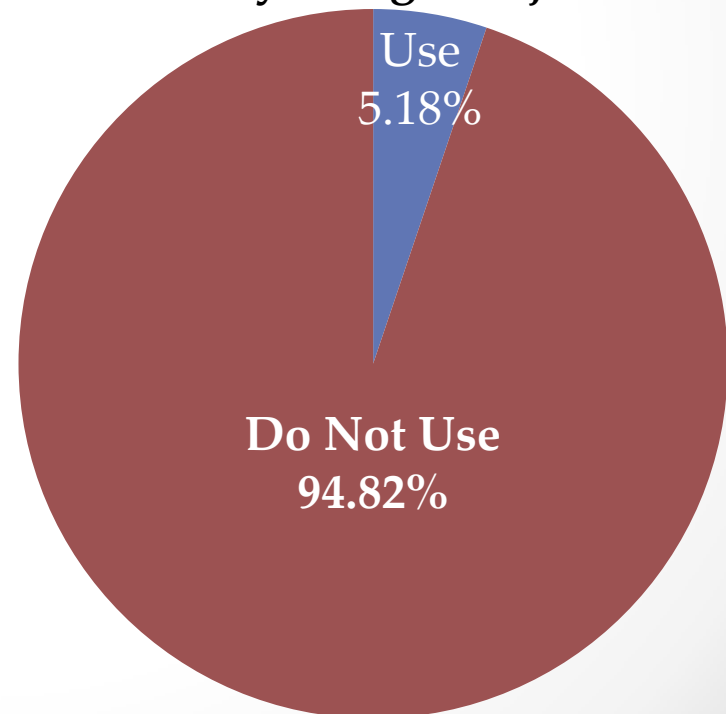
Marijuana & Health

- Most Iowans are not current users (past 30 days) of marijuana. 2012 Iowa Youth Survey & 2010-2011 National Survey on Drug Use & Health

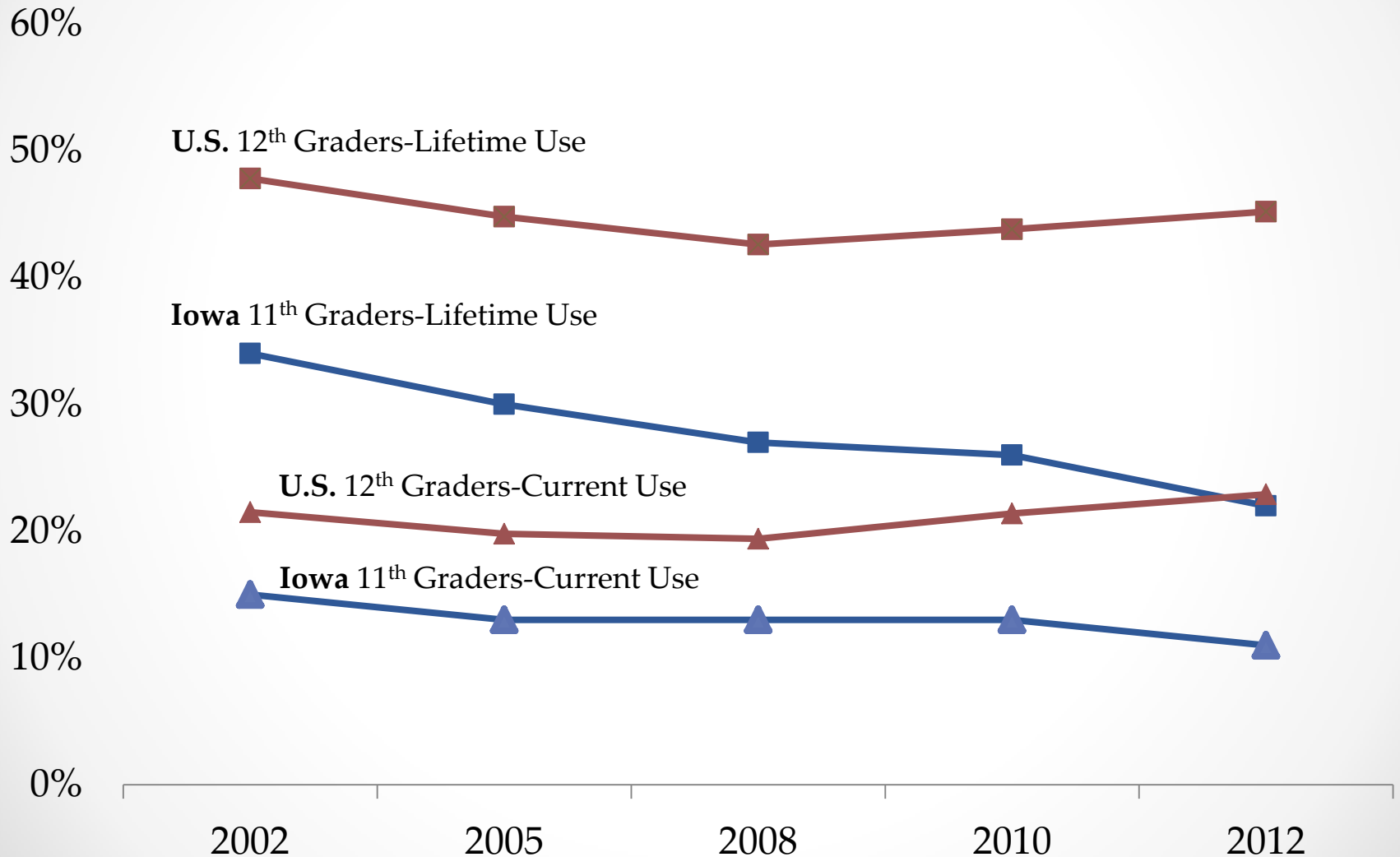
**Iowa 6th, 8th & 11th graders
currently using marijuana.**



**Iowans 12 & older
currently using marijuana.**



Marijuana & Health: Iowa vs. U.S.



Marijuana & Health

- Marijuana is the 2nd leading substance for which Americans receive drug treatment & a major cause for visits to emergency rooms. 2010 U.S. Substance Abuse & Mental Health Services Administration, Treatment Episode Data Set
- Marijuana was involved in 36% of all U.S. emergency department visits involving illegal drugs. The rate of emergency department visits involving marijuana increased 19% from 2009-2011, and is up 52% since 2004. 2011 Substance Abuse & Mental Health Services Administration, Drug Abuse Warning Network
- Marijuana was involved in 758 Iowa emergency department visits, or 19% of substance abuse related visits for which a drug other than alcohol was identified. 2011 Iowa Department of Public Health

Marijuana & Health

- Marijuana, the most widely used illicit drug, may double stroke risk in young adults. 2013 University of Auckland in New Zealand, American Stroke Association's International Stroke Conference
- Marijuana is a causal component, among others, in the development of schizophrenia & other psychotic disorders. Using marijuana increases the risk of young people developing a psychotic illness, such as schizophrenia. 2004 British Journal of Psychiatry & 2007 Lancet

Marijuana & Health

- Researchers found that dopamine levels in a part of the brain called the striatum were lower in people who smoke more cannabis & those who began taking the drug at a younger age. They suggest this finding could explain why some cannabis users appear to lack motivation to work or pursue their normal interests. 2013
Imperial College London, UCL & King's College London, Biological Psychiatry Journal
- Studies reveal that marijuana potency has almost tripled over the last 20 years. 2010 Journal of Forensic Sciences, Vol. 55, No. 5
- Marijuana sold in dispensaries as medicine is the same quality & carries the same health risks as marijuana sold on the street. July 2012 National Institute on Drug Abuse, NIH, Drug Facts

Marijuana & Health

- Cannabis can be detected in the blood of daily smokers for a month after last intake. In 2009, 12.8% of young adults reported driving under the influence of illicit drugs & in the 2007 National Roadside Survey, more drivers tested positive for drugs than alcohol. Cannabis smokers had a 10-fold increase in car crash injury vs. infrequent or nonusers after adjustment for blood alcohol concentration. 2013 American Association for Clinical Chemistry
- Iowa recorded 28 drug-related traffic fatalities in 2012. Drug-related traffic fatalities for the last two years (57) nearly equal the total for the 4 previous years (60). 2012 Iowa Department of Transportation & Public Safety

Marijuana & Health

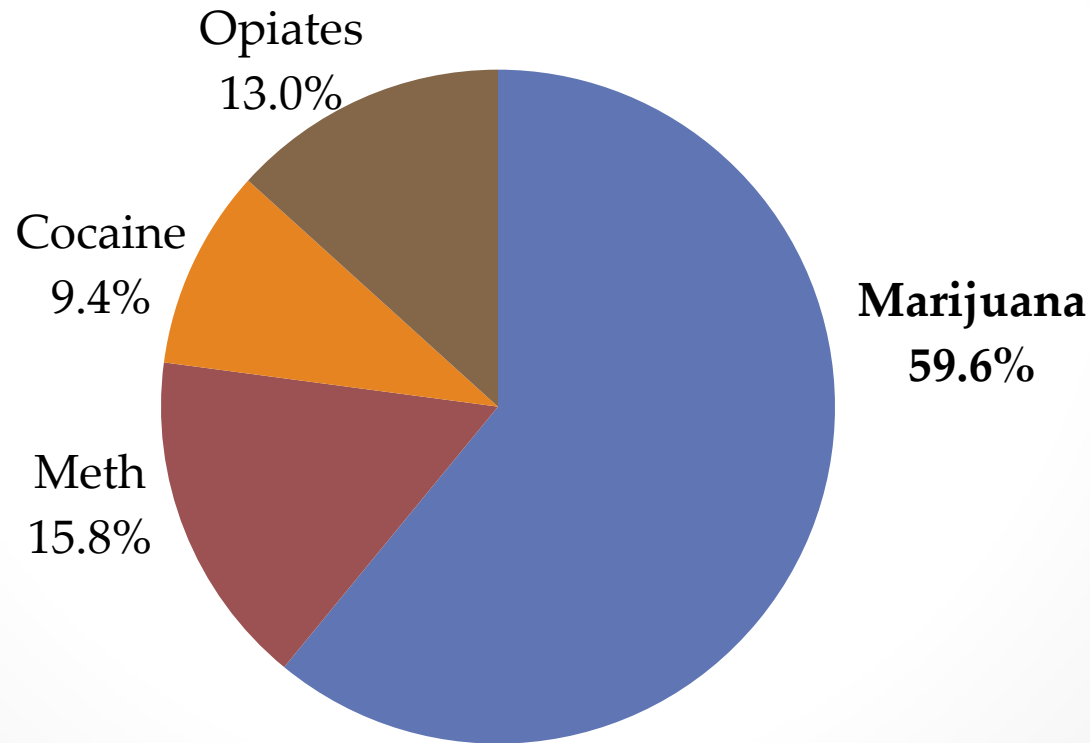
- Despite having the highest per capita rate of “medical marijuana” use in the U.S., a study of Colorado doctors finds most family physicians in that state are not convinced of marijuana’s health benefits & believe its use carries risks. 19% of Colorado doctors said physicians should recommend “medical marijuana,” while 46% said they should not do so. February 2013 Journal of the American Board of Family Medicine
- Doctors should not prescribe “medical marijuana” to teens with chronic pain. The consequences may be very, very severe, particularly for adolescents who may get rid of their pain—or not—at the expense of the rest of their life. June 2013 Mayo Clinic Proceedings

Workplace Safety & Productivity

- Heavy marijuana use can impair physical & mental health, cognitive abilities, social life & career status. 2010
National Institute on Drug Abuse, NIH, Info Facts
- Worker marijuana use is associated with more absences, tardiness, accidents, workers' comp claims & turnover. Those testing positive for marijuana had 55% more accidents, 85% more injuries & 75% more absenteeism.
2010-2011 National Institute on Drug Abuse, NIH, Research Report Series

Workplace Safety & Productivity

- 59.6% of + Iowa workplace drug tests were for marijuana.
2002-2008 Iowa Department of Public Health



Marijuana & Youth

- Teen past-month heavy marijuana users in the U.S. are more likely than teens who have not used marijuana in the past year to: use cocaine/crack (30x); use Ecstasy (20x); abuse prescription pain relievers (15x); & abuse over-the-counter medicines (14x). 2012 Partnership Attitude Tracking Study
- Anti-marijuana attitudes among U.S. teens have eroded, with about half (51% vs. 61% in 2005) saying they see “great risk” in using marijuana. 2012 Partnership Attitude Tracking Study
- Increased availability & acceptability of marijuana would likely lead to increased consumption of the drug.
2010 Rand Corporation

Marijuana & Youth

- 6.5% of high school seniors nationally smoke marijuana daily, up from 5.1% five years ago. 2012 Monitoring The Future Survey-University of Michigan
- Past month marijuana use increased 14.2%-17% among 10th graders & 18.8%-22.9% among 12th graders. It's the highest point for high school seniors since the late 1990's, & coincides with only 20.6% of them seeing occasional marijuana use as harmful, the lowest perception of risk since 1983. 2012 Monitoring The Future Survey-University of Michigan
- The rate of past month marijuana use by America's 8th, 10th & 12th graders exceeds cigarette smoking in all three grade levels. 2012 Monitoring The Future Survey/University of Michigan

Marijuana & Youth

- The risk of concussion is 3 to 5 times higher for teenagers who use marijuana or alcohol. Those who reported using marijuana 10 or more times over the past year had more than 3 times the risk, compared with students who did not use alcohol or marijuana. 2013 Journal of the American Medical Association, St. Michael's Hospital-Toronto
- Marijuana use negatively effects motivation, memory & learning. 2011 National Institute on Drug Abuse, NIH, Facts Parents Need to Know
- Substance use, especially marijuana use, contributed to college students skipping more classes, spending less time studying, earning lower grades, dropping out of college and being unemployed after college. March 2013 Journal of Studies on Alcohol & Drugs, University of Maryland School of Public Health Study

Marijuana & Youth

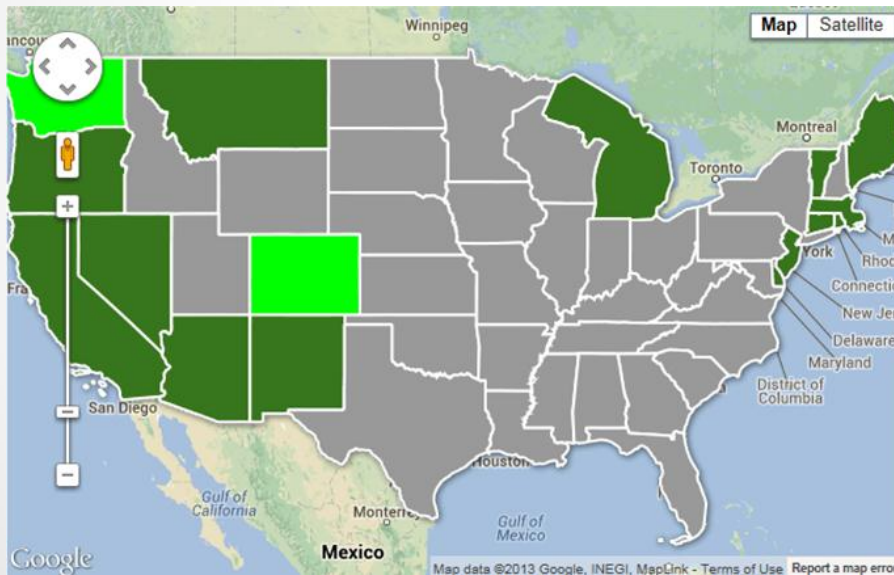
- Persistent marijuana use during adolescence can cause a long-term 8-point drop in IQ, & harm attention span & memory. 2012 National Academy of Sciences, Dunedin Study
- “IQ is a strong determinate of a person’s access to college education, getting a job, performance on the job & tendency to develop heart disease. So those individuals who lose IQ points may be disadvantaged toward the most important aspects of life.” Dunedin Study lead author & Duke University researcher, Madeline Meier

Marijuana & Youth

- Under US law, federal student aid may be suspended, in the event of a drug conviction for an offense that occurs while receiving the aid. College students can regain federal aid eligibility by successfully completing an approved substance abuse treatment program or passing two drug tests by an approved program. US Department of Education
- In Iowa, during the 2011-2012 school year, 13 of 199,720 college students (0.0065%) qualified for suspension of federal student aid. 2012 Iowa College Student Aid Commission

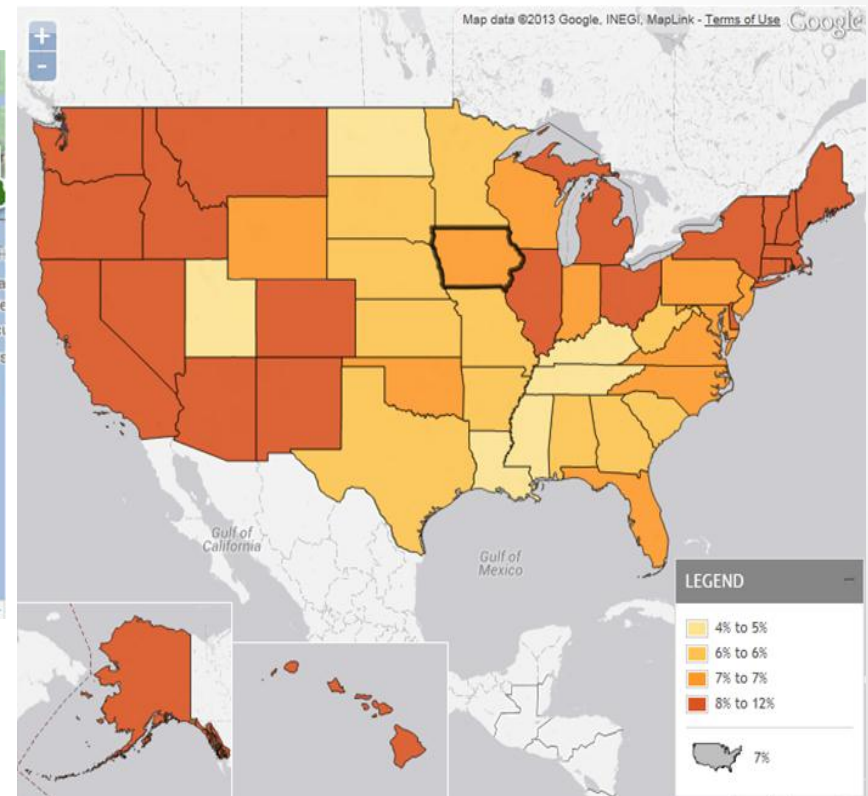
Marijuana & Youth

States with “Medical Marijuana”
(2013 Governing Magazine)



Plus Alaska & Hawaii, not shown.

Marijuana Use by Age Group: 12-17
(2013 Kids Counts/NSDUH, 2009-2010)



“Medical Marijuana:” Case Studies

- Few California “medical marijuana” users have cancer, HIV/AIDS, glaucoma or MS. The average user is 32 years of age, & 87.9% tried marijuana before age 19. 2011
Journal of Drug Policy Analysis. 2007 O’Connell, T., Harm Reduction Journal
- Oregon’s “medical marijuana” users cite severe pain 65% of the time vs. 5% reports of cancer, glaucoma & HIV/AIDS combined. October 2012 Oregon Health Authority
- In Arizona, 47% of “medical marijuana” users are 40 years of age or younger. Among users with a single debilitating condition, 71% cite pain & 9% others. 2012 Arizona
Department of Health Services

“Medical Marijuana:” Case Studies

- Nearly 40% of Colorado’s “medical marijuana” users are 12-34 years of age, & the age of the average user is 41. 94% of all users cite severe pain. 2012 Colorado Department of Public Health & Environment
- 11.6% of Arizona high school marijuana smokers got it from a “medical marijuana” user. 2012 Arizona Criminal Justice Commission
- 48.8% of adolescents surveyed in a Denver drug treatment program obtained marijuana from a “medical marijuana” user. 2011 Drug Alcohol Dependency, Thurstone

“Medical Marijuana:” Case Studies

- 85% of all “medical marijuana” users in Colorado were registered by 50 physicians (< 3% of licensed docs). 15 doctors registered 49% of users, & one doc handled 10% of users. 2011 Nussbaum, Boyer & Kondrad-MDs/Colorado Department of Public Health & Environment
- In Oregon, 9 physicians accounted for half of all “medical marijuana” users. One doctor saw 40-80 users/day, & a retired heart surgeon helped 4,180 “medical marijuana” users in a year. 2012 The Oregonian

“Medical Marijuana:” Case Studies

- The relaxation of marijuana laws in Colorado has caused a significant spike in the number of young children treated for accidentally eating marijuana-laced cookies, candies, brownies & beverages. The allure of these marijuana edibles, which taste & look like simple sweets, makes them especially risky. May 2013 Journal of the American Medical Association Pediatrics
- Following 3 years of decline, drug-related out-of-school suspensions & expulsions of Colorado students increased 33% & 40% respectively in 2009-2010 vs. 2008-2009. 2012 Colorado Department of Education

“Medical Marijuana:” Case Studies

- Colorado drivers in fatal car crashes testing positive for marijuana doubled 2006-2010. 2010 Colorado Department of Transportation
- Lawmakers in Washington State & Colorado are trying to determine how police officers can identify drivers impaired by marijuana use. Setting limits is going to cause a lot of impaired drivers to be missed & a lot of innocent people to get arrested. May 2013 Wall Street Journal

“Medical Marijuana:” Case Studies

- Residents of states with “medical marijuana” laws had marijuana abuse/dependence rates almost twice that of other states. In another study, marijuana usage rates among youths age 12-17 were higher in “medical marijuana” states (8.6%) vs. other states (6.9%). 2012 Cerda, M., Drug & Alcohol Dependence. 2011 Wall, M., Annals of Epidemiology
- Denver has 204 “medical marijuana” dispensaries, roughly 3 times the number of Starbucks & McDonald’s combined. 2012 CBS’ 60 Minutes

“Medical Marijuana:” Alternatives

- Research shows a few orally-administered individual *components* of the cannabis plant’s principal psychoactive ingredient tetrahydrocannabinol (THC) do have therapeutic potential to relieve pain, control nausea, stimulate appetite & decrease ocular pressure. Smoking or ingesting crude marijuana is not required.
- Dronabinol (Marinol) & Nabilone (Cesamet) are FDA-approved & legally available as prescription pills.
- Pain relief from pills (e.g., Dronabinol) may last longer, & may not leave people feeling as high as they do after they smoke the drug. April 2013 Neuropsychopharmacology Journal

“Medical Marijuana:” Alternatives

- The FDA is considering a mouth spray (Sativex) with 2 synthetic cannabinoids.
- University of Mississippi researchers have developed a patch to deliver THC.
- Many other FDA-approved medicines, currently available in dose-specific forms that do not involve marijuana, are prescribed & dispensed regularly by health care professionals as safe & effective treatments.
- Research continues on cannabinoids, & other substances, to determine if they may be formulated similar to other medicines for medical use (e.g., morphine from opium, aspirin from tree bark, penicillin from moldy bread, etc.).

Marijuana & Public Safety

- Few people are in state or federal prison for marijuana crimes, particularly possession offenses. The most recent national survey of state prison inmates shows 6% were drug possession offenders & 4.4% were drug offenders with no prior sentences. 2008 White House Office of National Drug Control Policy
- Of all 3,571 Iowa prison admissions last year, 5% were primarily for drug possession, 2.3% for marijuana possession, & 0.17% (6) for 1st-time marijuana possession as the most serious offense. Many marijuana offenders admitted to Iowa prison had prior convictions &/or probation revocations. 2012 Iowa Division of Criminal & Juvenile Justice Planning

Marijuana & Public Safety

- In a random sampling of 100 drug offenders admitted to Iowa prisons whose primary drug was marijuana:
 - 63% were for trafficking offenses, 20% for possession offenses & 17% for other offenses.
 - 93% had at least one prior criminal conviction (at least 80% had prior felony convictions).

2012 Iowa Division of Criminal & Juvenile Justice Planning
- 63.6% of Iowa substance abuse treatment referrals are via the criminal justice system. 2012 Iowa Department of Public Health

Marijuana & Public Safety

Maximum marijuana possession penalties under Iowa law:

- 1st offense = serious misdemeanor, up to a \$1,000 fine & 6 months in jail.
- 2nd offense = serious misdemeanor, up to a \$1,875 fine & 1 year in prison.
- 3rd offense = aggravated misdemeanor, up to a \$6,250 fine & 2 years in prison.
- (Note: Marijuana possession cases frequently result in deferred judgments & a civil penalty of \$315. Courts may, & often do, suspend all or part of jail sentences.)

Marijuana Costs & Other Issues

- Marijuana legalization would not eliminate the black market. Legalization means price comes down, the number of users goes up, the underground market adapts, & any revenue gained through new taxes most likely would not keep pace with the financial & social cost of making the drug more accessible. 2012 White House Office of National Drug Control Strategy
- Taxes on marijuana would never pay for the increased social costs that would result from more users. Our nation's experience with alcohol & tobacco shows that for every dollar gained in taxes, we spent 10 on social costs. 2009 Lancet, Global Burden of Disease and Injury & Economic Costs Attributable to Alcohol Use

Marijuana Costs & Other Issues

- Legalization would not curb drug-related violence. Marijuana accounts for only a portion of proceeds gained by criminal organizations profiting from heroin, cocaine & meth distribution, human trafficking, other crimes & the marijuana trade. 2012 White House Office of National Drug Control Policy
- “Medical marijuana is being diverted inside Colorado and to other states across the country...23 states were identified receiving Colorado’s “medical marijuana. “ 2012 Rocky Mountain High Intensity Drug Trafficking Area

Marijuana Costs & Other Issues

- Iowa law enforcement officers are seizing increasing amounts of marijuana originating in Colorado. In 2010, Colorado was the source state in 10% of all Iowa drug interdiction stops finding marijuana. That grew to 25% in 2011 and 36% in 2012. 2013 Iowa Department of Public Safety
- Outdoor marijuana cultivation sites are increasingly common. “Grows” often result in destruction of natural habitat from diesel spills, pesticide runoff & trash. 2010 National Drug Intelligence Center
- Recent eradication efforts in Iowa indicate fewer, but larger, marijuana grows. The 5,813 plants seized so far in FY 2013 is the most in 4 years. 2012 Iowa Department of Public Safety

White House Position on Marijuana

- President Obama has said federal law enforcement will not pursue recreational marijuana users in states that have determined that it's legal. Meanwhile, federal prosecutors have been cracking down on growers and sellers of “medical marijuana” for alleged law violations.

2012 ABC News

- “I...do not believe that legalizing drugs is the answer.”

2013 President Obama in Mexico City

- The Obama administration steadfastly opposes legalization of marijuana & other drugs because legalization would increase the availability & use of illicit drugs, & pose significant health and safety risks to all Americans, particularly young people.
- 2012 White House Office of National Drug Control Policy

ODCP Position on Marijuana

- The consensus of available scientific research does not support a lessening of current Iowa marijuana controls. Increasing access to, & sending mixed messages about, marijuana would put more Iowa youth at risk & lead to more addiction & other drug-related problems.
- ODCP supports additional research into the cannabis plant's many components, but opposes marijuana legalization in any form because of the negative health, safety & economic effects it would have on Iowans.

Key Questions

- What are the facts, where do they come from, & who else needs to know?
- Who pays for pro-marijuana legalization efforts, & why?
- What are possible unintended consequences?
- What does science tell us, & what are the public safety considerations?
- What can we learn from states that have approved some form of marijuana legalization?

Key Questions

How would marijuana use by others impact your family's health & safety?

- Accountants
- Attorneys
- Auto Mechanics
- Construction Workers
- Day Care Providers
- Educators
- Engineers
- Health Care Providers
- Manufacturers
- Motorists
- Paramedics
- Pharmacists
- Police Officers & Firefighters
- Policy Makers
- Transit Workers
- Etc.

Is it good for Iowa children?

Stay Safe!

Iowa Governor's Office of Drug Control Policy

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